

Reportability Options

When deciding whether a case is reportable, you have three response options:

Y = Yes. This case is reportable.

"Yes" includes cases where—

- The final diagnosis contains terms that are reportable.
- The final diagnosis may not contain reportable terms, but the report contains ANY terminology that would be a qualifying diagnostic term. This includes reportable terminology in the clinical history or comments sections or elsewhere in the body of the report itself.

For example: the bone marrow biopsy report was negative, but the clinical history stated "lymphoma."

N = No. This case is not reportable.

"No" includes cases in which there were no diagnostic terms or terminology in the final diagnosis or elsewhere in the report.

I = Investigate Further. This case needs to be investigated further to determine eligibility.

"I" includes cases where—

- The final diagnosis is negative or contains ambiguous terminology that does not qualify as diagnostic, but there is an indication that further studies would be done, an addendum report is to follow, or clinical correlation is recommended. Also, there is no reportable terminology elsewhere in the report. This case needs to be investigated further and the additional studies or reports reviewed to make a determination on eligibility.
- There is a history of cancer but the final diagnosis is negative. This case should be investigated further to confirm that this procedure was not part of the original work-up for the cancer.
- **Carcinoma In Situ (CIS)** or **Cervical Intraepithelial Neoplasia III (CIN III)** may be reportable in certain states. Because it is not reportable in every state, please code CIS or CIN III to "I," "Investigate Further." Please be sure to check the reportability rules for the state you are employed in.